

STATE OF MICHIGAN
DEPARTMENT OF ATTORNEY GENERAL

APPLICATION FOR LICENSE OF PROFESSIONAL FUND RAISER

APPLICATION FOR LICENSE YEAR JULY 1, 20___ TO JUNE 30, 20___.

CHECK ONE: _____ New
 _____ Renewal

Date: _____

License Number: _____

PLEASE TYPE OR PRINT IN INK

Legal Name _____

Mailing Address _____

(Area Code) _____

(Telephone Number) _____

City _____

County _____

State _____

Zip _____

Physical Address if different than above address _____

Date Created _____

What State _____

1. Are you incorporated?

Yes

No

☐☐

If yes, attach a complete copy of Articles of Incorporation and/or Certificate of Assumed Name and any amendments showing acceptance by appropriate agency unless already filed with this office.

If yes, list the names and addresses of the principal officers, all of the directors, and the shareholders holding 5% or more of the stock of the corporation.

Use additional sheets if necessary. _____

If no, list the names and addresses of the five persons with the greatest control of the entity: _____

2. If your PERMANENT office is located outside of the State of Michigan, you are REQUIRED to name a Resident Agent. This Agent must be a resident of the State of Michigan or a corporation located in the State of Michigan whose purpose is to act in this capacity.

Name of Agent: _____

Address: _____

Telephone No.: _____

<p>3. Has the applicant or any of its principal officers, directors, or shareholders holding 5% or more of the stock of the corporation ever been enjoined from conducting professional fund raising activities? If yes, give details: _____</p> <p>_____</p> <p>_____</p>	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>4. Has the applicant or any of its principal officers, directors, or shareholders been convicted in any jurisdiction of a crime related to the raising of funds by solicitations from the public? If yes, give details: _____</p> <p>_____</p> <p>_____</p>	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>5. Has the applicant or any of its officers, directors, employees or members of their immediate families personally benefited from the operation and management of a charitable/religious organization on whose behalf the applicant carried on a campaign of soliciting contributions other than a reasonable fee? If yes, give details: _____</p> <p>_____</p> <p>_____</p>	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>
<p>6. Has the applicant or any of its officers, directors, employees or members of their facilities received any part of the income or assets of a charitable/religious organization on whose behalf the applicant carried on a campaign of soliciting contributions other than a reasonable fee? If yes, give details: _____</p> <p>_____</p> <p>_____</p>	<p>Yes <input type="checkbox"/></p>	<p>No <input type="checkbox"/></p>

7. For renewal applications only. New applicants go to No. 8.

A) See the attached Contract Schedule(s). The Contract Schedule lists the organizations with which, according to our records, you have a contractual relationship. An organization may be listed more than once depending upon the type of contract. Each line of the schedule must be updated according to the instructions on the schedule.

B) Provide copies of all new contracts, extensions, or addenda entered into with the listed organizations since your last application unless you have previously submitted the document.

CONTRACT TYPES:

1 - Consulting

2 - Solicits, does not handle funds

3 - Special Event

4 - Sell coupon books

5 - Sell advertising space

6 - Sell other items

7 - Solicits, handles funds

8 - Other (attach explanation)

8. Complete the listing on page 3 for all charitable/religious organizations under contract which solicit, or wish to solicit, in Michigan. Renewal applicants should only list organizations which are not on the attached contracts schedule.

Provide a copy of the contract for each listing. Contract types are listed above. If the contract is type 3-8, each contract for a campaign or event in Michigan must be listed separately. If the contract is type 3, enter the show date if known. If the contract is type 4-8, enter the end date of the campaign if known. If the show date or the end date is not yet known, enter TBD (to be determined). MICS# refers to the organization's Michigan solicitation license number.

If there are no organizations under contract, check here: _____ NONE

LEGAL Name & Address of Organization	Org. MICS #	Date Contract First Executed	Contract Type	Show Date/ Campaign End Date
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

NOTE: This information and copies of contracts must continue to be provided as contracts are signed throughout the year. You must also notify our office of all contract terminations within ten (10) days of termination date. Use the enclosed professional fund raiser summary sheet.

9. All individuals (including applicant) authorized by this Professional Fund Raiser to sign legal documents MUST PERSONALLY SIGN and PRINT NAME BELOW.

* * _____
SIGNATURE OF AUTHORIZED INDIVIDUAL

Printed name of above individual

** _____
SIGNATURE OF AUTHORIZED INDIVIDUAL

Printed name of above individual

* * _____
SIGNATURE OF AUTHORIZED INDIVIDUAL

Printed name of above individual

** _____
SIGNATURE OF AUTHORIZED INDIVIDUAL

Printed name of above individual

NOTE: Professional Fund Raiser must submit authorization and signature as described above for each person added during the license year.

CERTIFICATION

The information set forth in this application and supporting documents is true and complete to the best of my knowledge and belief and is submitted for the purpose of obtaining a professional fund raiser license pursuant to the Charitable Organizations and Solicitations Act, 1975 PA 169, as amended; MCL 400.271 et seq; MSA 3.240(1) et seq.

Subscribed and sworn to before me this

_____ day of _____, 19 _____

Notary Public

_____ County,

State of _____

My Commission Expires: _____

Signature of Applicant

Printed Name of Applicant

Title of Applicant

Address: _____

Phone: (_____) _____

ITEMS TO BE INCLUDED WITH THIS APPLICATION

NOTE: Omissions will cause Application to be returned unapproved.

1. SURETY BOND (our form) and Surety's "Power of Attorney" form signed and dated by bonding company.
If original bond is on file with this office, submit a CONTINUATION CERTIFICATE showing bond is continued through June 30 of the new license year.
2. If INCORPORATED, a complete copy of Articles of Incorporation and/or Assumed Name Certificate(s) showing acceptance in state where filed, unless currently on file with this office. "FILED" copies of amendments must be submitted as documents are amended.

If incorporated in a state other than Michigan, a copy of Certificate of Authority to Conduct Affairs in Michigan as filed with and showing acceptance by the Michigan Corporation, Securities, and Land Development Bureau, if required under corporate law.
3. Copies of ALL CONTRACTS with organizations which solicit contributions from residents in Michigan.
See No. 1, 2 and 3 of "Instructions" and No. 7 and 8 of this Application.
4. "REGISTRATION OF PROFESSIONAL SOLICITOR" form for each solicitor retained to solicit contributions with the State of Michigan. These forms MUST BE SUBMITTED to this office for APPROVAL PRIOR to solicitation activity. See No. 4 of "Instructions".
5. CAMPAIGN FINANCIAL STATEMENTS of renewal applicants for all type 3 - 8 special events which occurred or campaigns which ended more than 90 days prior to your submission of the application. If the contracts are continual in nature, campaign financial statements are required on an annual basis. See No. 7 for contract types.

DEPARTMENT OF ATTORNEY GENERAL
Charitable Trust Section
PO BOX 30214
Lansing, MI 48909
(517) 373-1152
www.michigan.gov/ag

STATE OF MICHIGAN

**INSTRUCTIONS
FOR APPLICANTS FOR "LICENSE OF PROFESSIONAL FUND RAISER"**

(Pursuant to Charitable Organizations and Solicitations Act,
1975 PA 169, as amended; MCL 400,.271 et seq; MSA 3.240(1) et seq)

To assure compliance with Michigan law and to avoid placing your licensure in jeopardy, **PLEASE READ THOROUGHLY** and retain for future reference.

1. Your EXACT LEGAL NAME and the EXACT LEGAL NAME of each organization under contract must be used on all contracts, forms, correspondence, etc. Your exact legal name, or the exact legal name of the organization under contract with you, can be found on the creating document as follows:
 - A. If incorporated in Michigan: Use the name shown on the current articles of incorporation that are filed with the Michigan Corporation, Securities, and Land Development Bureau.
 - B. If incorporated in another state or the District of Columbia: Use the name on the articles of incorporation that are currently on file with the appropriate state or District agency.
 - C. For ORGANIZATIONS that are NOT incorporated: Use the name shown on the organization's Constitution and/or Bylaws.
 - D. For FUND RAISERS that are NOT incorporated: Use your individual name, or names; also submit each d/b/a, as filed with the county clerk in each county where you are doing business under that name.
 - E. If an organization is incorporated and also uses an assumed name: A list of all assumed names must be submitted along with Certificates of Assumed Name that are filed with the Corporation, Securities, and Land Development Bureau (or other appropriate agency, if not a Michigan corporation). Corporate name and assumed name(s) should be indicated.
2. If an organization with which you are doing business does not have a current charitable solicitation license or determination of exemption from the license requirement, you should furnish the organization with a copy of a blank "INITIAL CHARITABLE TRUST/CHARITABLE SOLICITATION QUESTIONNAIRE" to fill out and submit with a copy of its creating document, as described in No. 1 above. (Keep on file a copy of our revised Questionnaire to duplicate and distribute.)

The organization must obtain a charitable solicitation license or an exemption before fund raising can begin.

(continued on back)

Please review 1975 PA 169 so that you are familiar with the licensing requirements of professional fund raisers and the charitable/religious organizations with whom you contract. Please note that churches, schools and hospitals are not required to be licensed and need not submit a Questionnaire. The professional fund raiser, however, must submit the contracts.

3. **CONTRACTS:** Copies of all contracts (and amendments) between professional fund raisers and charitable/religious organizations must be submitted to this office within ten (10) days of signing. Information required in No. 8 of the Application must continue to be provided as contracts are signed and renewed. Notify us if a contract is cancelled.

Contracts must show legal name, Assumed Names if any, and accurate mailing address of the organization. (See No. 1 above.)

4. **REGISTRATION OF PROFESSIONAL SOLICITOR FORM:** Each Solicitor must be registered with this office prior to solicitation activity. Using an unregistered solicitor is a violation of 1975 PA 169, subject to civil and criminal penalties.

See specific instructions for completion of revised form. Note:

- A. All signatures must be original and personally signed. PFR is responsible for ensuring that signatures are proper.
Photostatic copies of signatures will not be accepted. Improperly signed and incorrectly dated forms will be returned, unapproved.
- B. When submitting more than one solicitor registration form, please put in alphabetical order by last name of solicitor.
- C. Copies of approved form will be returned to professional fund raiser. Professional Fund Raiser is responsible for ensuring that each solicitor has received approval from the Department of Attorney General before solicitor can begin employment. Professional Fund Raiser must submit listing of names and addresses of solicitors used in each campaign upon request.
5. If a "CONDITIONAL" license is issued, all conditions must be followed. Noncompliance can result in revocation of the license.

NOTE: ALL PROFESSIONAL FUND RAISER LICENSES AND SOLICITOR REGISTRATIONS EXPIRE ON JUNE 30 OF EACH YEAR.

Direct all correspondence to:
DEPARTMENT OF ATTORNEY GENERAL
Charitable Trust Section
PO Box 30214
Lansing MI 48909
(517) 373-1152